



EV 323630229 US

Mailing Label
Label 11-F June 2002



UNITED STATES POSTAL SERVICE®

Post Office To Address

ORIGIN (POSTAL USE ONLY)			
PO ZIP Code	Day of Delivery	Flat Rate Envelope	
	<input type="checkbox"/> Next <input type="checkbox"/> Second	<input type="checkbox"/>	
Date In	Postage		
Mo. Day Year	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	\$	
Time In	Military		
<input type="checkbox"/> AM <input type="checkbox"/> PM	<input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee	
Weight	Int'l Alpha Country Code	COD Fee	Insurance Fee
lbs. ozs.			
No Delivery	Acceptance Clerk Initials	Total Postage & Fees	
<input type="checkbox"/> Weekend <input type="checkbox"/> Holiday		\$	

DELIVERY (POSTAL USE ONLY)			
Delivery Attempt	Time	Employee Signature	
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM		
Delivery Attempt	Time	Employee Signature	
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM		
Delivery Date	Time	Employee Signature	
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM		

WAIVER OF SIGNATURE (Domestic Only) Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent. If delivery employee judges that article can be left in secure location, and I authorize that delivery employee's signature constitutes valid proof of delivery.

NO DELIVERY Weekend Holiday

Customer Signature

CUSTOMER USE ONLY
METHOD OF PAYMENT:
Express Mail Corporate Acct. No. **X090471**

Federal Agency Acct. No. or
Postal Service Acct. No.

FROM: (PLEASE PRINT) PHONE () _____

TO: (PLEASE PRINT) PHONE () _____

MC GLEW & STUTTLE P.C.
SCARBOROUGH STATION RD
PO BOX 327
SCARBOROUGH NY 10510-0827

COMMISSIONER FOR PATENTS
PO BOX 1450
ALEXANDRIA VA 22313-1450

PRESS HARD.

You are making 3 copies.

FOR PICKUP OR TRACKING CALL 1-800-222-1811 www.usps.com

1407 20 F:02 T:12

TUESDAY

OCTOBER 7, 2003